Effective October 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			32 minus 20=		• 12			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			H minus 3 =		' /			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL		
S/2/05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
NT A	- 4 4 g 2	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	.25	Minus		15			X\$ 9=		OR	X\$18=	/
	Independent	•. 4	Minus	4	<i>l</i>		1	X40=		OR	X80=	
口	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		J	+135=		OR	+270=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
	· 	(Column 1)		(Colu	umn 2)	(Column 3).	AUUII. FEE		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
NT B		CLAIMS REMAINING AFTER AMENDMENT		PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=	1	X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
								ADDIT. FEI		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PRE	SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OM ME	Total		Minus	••		=		X\$ 9=		OR	X\$18=	ï
MEN	Independent	•	Minus	•••		=	1	X40=		OF	X80=	
	FIRST PRESE	NTATION OF	MULTIPLE DE	PENDE	NT CLAIM			+135=		OR		
	if the entry in colu	ımın 1 is less thar	the entry in col	umn 2, w	rite "0" in c	olumn 3.		TOTA		-1	TOTA	<u>-</u>
"	"if the entry in column 1 is less than the entry in column 2, write "0" in column 3. "if the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

Application or Docket Number